

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		09/28/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>M. H.</i>	625	10-30-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	4/22/04
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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